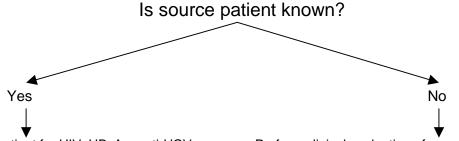
## Substantial Exposure to Blood or Other Potentially Infectious Body Fluids

Washington State Clinical Laboratory Advisory Council to the Washington State Department of Health Originally published: October 2000, Revised: September 2001

### FOR EDUCATIONAL PURPOSES ONLY

The individual clinician is in the best position to determine which tests are most appropriate for a particular patient.



- Test source patient for HIV, HBsAg, anti-HCV and ALT (SGPT) unless already tested
- Perform clinical evaluation of exposed person
- Test exposed person for anti-HBs (if status of exposed person is unknown), anti-HCV, ALT, and HIV
- Initiate or complete hepatitis B vaccine, give hepatitis immune globulin and HIV postexposure prophylaxis if indicated
- Provide counseling about risk of transmission

- Perform clinical evaluation of exposed person
- Test exposed person for anti-HBs (if status of exposed person is unknown), anti-HCV, ALT, and HIV
- Initiate or complete hepatitis B vaccine, give hepatitis immune globulin and HIV post-exposure prophylaxis if indicated
- Provide counseling about risk of transmission

#### **HIV Protocol**

Note: Refer to HIV Screening Guidelines for additional information

SOURCE	EXPOSED PERSON	
HIV negative, source low risk	- HIV testing	
	- No intervention	
HIV positive, HIV negative but source high risk,	- Clinical evaluation	
or HIV status unobtainable		
	- Consult CDC guidelines for prophylaxis	
	- Test for HIV initially and again at 6 weeks, 3 months,	
	and 6 months (at 12 months only if source is also	
	infected with hepatitis C)	

## **Hepatitis C Protocol**

Note: Refer to Hepatitis C Management Guidelines for additional information

SOURCE	EXPOSED PERSON
Low Risk	- No intervention
High risk or anti-HCV positive	- Test for anti-HCV and liver function (ALT) initially
	and again at 4-6 months. May offer HCV by PCR
	testing at 4-6 weeks.

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## **Hepatitis B Protocol**

# Recommended post-exposure prophylaxis for percutaneous or permucosal exposure to hepatitis B virus, United States

Note: Refer to Acute Hepatitis Testing Guidelines & Chronic Hepatitis Guidelines for additional information

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<u>Treatment when source is</u>					
Vaccination and anti- body response status of exposed person	HBsAg positive	HBsAg negative	Source not tested or status unknown		
Unvaccinated	HBIG <sup>1</sup> x 1; initiate HB vaccine series <sup>2</sup>	Initiate HB vaccine series	Initiate HB vaccine series		
<b>Previously vaccinated:</b> Known responder <sup>3</sup>	No treatment	No treatment	No treatment		
Known non-responder	HBIG x 2 or HBIG x 1 and initiate revaccination	No treatment	If known high-risk source, treat as if source were HBsAg positive		
Antibody response unknown	Test exposed person for anti-HBs  1. If adequate <sup>3</sup> , no treatment  2. If inadequate <sup>3</sup> , HBIG X 1 and vaccine booster	No treatment	Test exposed person for anti-HBs  1. If adequate <sup>3</sup> , no treatment  2. If inadequate <sup>3</sup> , give vaccine booster and recheck titer in 1-2 months		

<sup>\*</sup> About 5% of people don't respond to the hepatitis B vaccine; most are over age 50 or obese. 50% of non-responders to the first series of vaccine (3 doses) will respond to a second full series of 3 doses. If a positive anti-HBs can't be shown after 3 to 6 doses (1 to 2 series), the person is considered a non-responder and not protected.

#### References:

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- 3. Nursing Clinics of North America 1999; 34:213
- CDC. Recommendations for Prevention and Control of Hepatitis C virus (HCV) Infection and HCV-Related Chronic Disease. MMWR 1998;47 (RR-19);1-39
- 5. CDC. Hepatitis B Virus: A Comprehensive Strategy for Eliminating Transmission in the United States through Universal Childhood Vaccination: Recommendations of the ACIP. MMWR 1991;40 (RR-13);21-25
- CDC. Public Health Service Guidelines for the Management of Health-Care Worker Exposures to HIV and Recommendations for Post Exposure Prophylaxis. MMWR 1998;47 (RR-7);1-28
- 7. CDC. Hepatitis B Post-exposure Prophylaxis Recommendations MMWR 1997; (RR-18) p23 Table 3
- 8. CDC. Updated United States Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV and HIV and Recommendations for Post Exposure Prophylaxis. MMWR 2001;50 (RR-11); 1-42.

## Reviewer:

1. Hofmann, Jo MD, Medical Director, Infectious Disease & Reproductive Health, WA State Department of Health

<sup>&</sup>lt;sup>1</sup> Hepatitis B immune globulin; dose 0.06 mL/kg intramuscularly

<sup>&</sup>lt;sup>2</sup> Hepatitis B vaccine

<sup>&</sup>lt;sup>3</sup> Responder is defined as a person with adequate levels of serum antibody to hepatitis B surface antigen (i.e., anti-HBs > 10 mIU/mL); inadequate response to vaccination defined as serum anti-HBs < 10 mIU/mL